



PHYSICAL THERAPY & OCCUPATIONAL THERAPY EVALUATIONS & SERVICES

Most of the Physical Medicine codes have been deleted from the fee schedule. These modalities and procedures have been replaced by two levels of evaluation services and three levels of treatment services. These services are defined in detail below.

Codes (X7001 - X7005) shall be used to code for services provided by physical and occupational therapists and assistants. Massage therapists shall also use these physical therapy codes.

The following physical therapy codes are all inclusive.

X7001: Comprehensive Evaluation

Key items would include:

- A detailed history
- A detailed examination
- A medical/rehabilitation decision making of low to moderate complexity.
- Documentation of a detailed evaluation, establishment of problem list, treatment goals, and a detailed treatment plan.
- Only appropriate for an initial patient examination

Contributory items would include:

- Case management and coordination of care with other providers or agencies consistent with the nature of the problem.
- Usually, the presenting problems are of moderate severity.

X7002: Limited Evaluation

Key items would include:

- Established patient reassessment or a new patient with a limited (or focused) problem.
- A problem focused history
- A problem focused examination
- Straight forward decision making
- Documentation of a problem focused evaluation, establishment of problem list, treatment goals, and a detailed treatment plan.

Contributory items would include:

- Case management and coordination of care with other providers or agencies consistent with the nature of the problem.
- Usually, the problems are focused and of a low to moderate severity.

X7003: Comprehensive Treatment

Key factors:

- Face to face patient interaction for prolonged periods for the purpose of providing hands-on care, (excluding the application of passive modalities), creating or changing exercise programs, etc.



- Initial instruction or extensive rehab on isokinetic or strengthening equipment (capital equipment vs. hand held or cuff weights).
- Face to face interaction with patient for the purposes of education, addressing patient concerns, discussion of rehab program progression, work status, etc.

Contributory factors:

- Patient injuries and problems are usually complex, requiring nearly all interactions to be done 1:1 basis.
- There is often a need for frequent rehab decisions (judgments) during the treatment sessions.
- Treatment sessions will be for a minimum of 45 minutes.
- Case management consistent with the severity of the problems.

X7004:

Expanded Treatment

Key factors:

- Face to face patient interactions for moderate periods of time for the purpose of providing hands-on care, (excluding the application of passive modalities), creating or modifying exercise programs, etc.
- Rehab using isokinetic or strengthening equipment (capital equipment vs. hand held or cuff weights).
- Occasional (or less frequent) face-to-face interactions with patient for the purposes of education, program progression, discussion, work status, etc.

Contributory factors:

- Patient has less complex injuries or injuries that have begun to resolve.
- Treatment sessions will be for a minimum of 30 minutes.
- Case management consistent with the severity of the problems.

X7005:

Limited Treatment

Key factors:

- Face to face patient interactions for short periods of time for the purpose of providing focused treatment, modifying an established exercise program, or the application of a modality.
- **Note:** Length of time the modality is used, example 30 min. ultrasound, does not add to the total treatment time or the complexity level of the treatment.
- Rehab with or without the use of non-capital equipment (e.g. theraband, hand held weights, etc.)

Contributory factors:

- Patient problem is usually focused.
- Case management as needed.